

Washington State Health Care Authority **Prescription Drug Program**

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August 20, 2007

Dear Interested Party:

Following recommendations by the Washington State Pharmacy and Therapeutics Committee, the Department of Social and Health Services - Health and Recovery Services Administration (DSHS-HRSA), the Health Care Authority - Uniform Medical Plan (UMP), and the Department of Labor & Industries (L&I) have named the following drugs as preferred in their respective therapeutic classes on the Washington State Preferred Drug List:

Ace Inhibitor Drugs

benazepril (generic products only) captopril (generic products only) enalapril (generic products only) lisinopril (generic products only) ramipril (Altace ®)*

* Subject to HRSA expedited prior authorization for patients meeting the HOPE study criteria

(Not part of L&I's benefit)

(EFFECT: Represents no change to the current PDL)

Antiplatelet Drugs

ER dipyridamole /ASA (Aggrenox ®) * Clopidogrel (Plavix ®) ** Clopidogrel (generic) **

- * Subject to HRSA expedited prior authorization for special populations (Stroke and Transient Ischemic Attack)
- ** Subject to HRSA expedited prior authorization for special populations (Acute Coronary Syndrome and Percutaneous Coronary Interventions)

(Not part of L&I's benefit)

(EFFECT: Adds generic clopidogrel as a preferred drug on the current PDL)

Calcium Channel Blocker Drugs

amlodipine (all generic preparations) diltiazem (all generic preparations) felodipine (all generic preparations) nifedipine (all generic preparations) verapamil (all generic preparations)

(Not part of L&I's benefit)

(EFFECT: Adds felodipine as a preferred drug on the current PDL)

Hepatitis C Drugs

peginterferon alpha-2a (Pegasys ®)

(Not part of L&I's benefit)

(EFFECT: Adds a new drug class to the current PDL)

Newer Sedative Hypnotic Drugs

zolpidem (generic products only)*

*Preferred and non-preferred drugs are subject to HRSA expedited prior authorization for treatment of insomnia. Drug therapy for HRSA clients is limited to a 30-day supply on initial fill, and 10 units per 30 days on all subsequent fills.

(L&I does not *cover chronic* use of scheduled sedative hypnotics; DAW/TIP will apply for *acute* use by L&I workers (see WAC 296- 20-03014(3))

(EFFECT: Adds a new drug class to the current PDL)

Skeletal Muscle Relaxant Drugs

baclofen (all generic preparations) cyclobenzaprine (all generic preparations) methocarbamol (all generic preparations) tizanidine (all generic preparations)

(EFFECT: Adds tizanidine as a preferred drug on the current PDL)

Targeted Immune Modulator Drugs

etanercept (Enbrel®)*
infliximab (Remicade®)**
adalimumab (Humira®)***

* Subject to HRSA expedite prior authorization for rheumatoid arthritis, ankylosing spondylitis, psoriatic arthritis, and plaque psoriasis.

** Subject to HRSA expedited prior authorization for ulcerative colitis

*** Subject to HRSA expedited prior authorization for Crohn's disease

(Not part of L&I's benefit)

(EFFECT: Adds Humira® as a preferred drug on the current PDL)

Triptan Drugs

sumatriptan (Imitrex ®) sumatriptan (Imitrex Injection ®) sumatriptan (Imitrex Nasal Spray ®) elitriptan (Relpax ®) zolmitriptan (Zomig/Nasal Spray/ZMT®)

(Not part of L&I's benefit)

(EFFECT: Represents no change to the current PDL)

Antiemetic (5HT3) drugs

NOTE: Updated decision delayed to complete cost analysis. Any resulting changes will not be implemented October 1, 2007.

Each agency will use the common PDL according to its benefit structure. The agencies will implement the changes listed above on October 1, 2007.

If you have other questions or comments regarding this announcement, please contact Regina Chacon at 206-521-2027 or by email at pdp@hca.wa.gov.

Sincerely,

Duane Thurman

Director, Prescription Drug Programs